

A FORM PTO-1390		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTORNEY'S DOCKET NUMBER
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371				050193-0217
				U.S. APPLIC. NO. (if known, see 37 CFR 1.5) Not yet assigned
INTERNATIONAL APPLICATION NO PCT/US2004/020736		INTERNATIONAL FILING DATE June 29, 2004	PRIORITY DATE CLAIMED July 2, 2003	
TITLE OF INVENTION OXAZOLIDINONE ANTIBIOTICS AND DERIVATIVES THEREOF				
APPLICANTS FOR DO/EO/US Milton HAMMOND, Yashumichi FUKUDA				
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:				
1.	<input checked="" type="checkbox"/>	This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.		
2.	<input type="checkbox"/>	This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.		
3.	<input type="checkbox"/>	This express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.		
4.	<input checked="" type="checkbox"/>	The US has been elected (Article 31).		
5.	<input checked="" type="checkbox"/>	A copy of the International Application as filed (35 U.S.C. 371(c)(2)) a. <input checked="" type="checkbox"/> is attached herewith (required only if not transmitted by the International Bureau). b. <input type="checkbox"/> has been communicated by the International Bureau. c. <input checked="" type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US)		
6.	<input type="checkbox"/>	An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).		
7.	<input checked="" type="checkbox"/>	Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) a. <input type="checkbox"/> are attached hereto (required only if not transmitted by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendment has NOT expired. d. <input type="checkbox"/> have not been made and will not be made.		
8.	<input type="checkbox"/>	An English translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).		
9.	<input type="checkbox"/>	An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).		
10.	<input type="checkbox"/>	An English translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).		
Items 11. to 16. below concern other document(s) or information included:				
11.	<input checked="" type="checkbox"/>	An Information Disclosure Statement under 37 CFR 1.97 and 1.98.		
12.	<input type="checkbox"/>	An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.		
13.	<input checked="" type="checkbox"/>	A preliminary amendment.		
14.	<input type="checkbox"/>	An Application Data Sheet under 37 CFR 1.76.		
15.	<input type="checkbox"/>	A substitute specification.		
16.	<input type="checkbox"/>	A power of attorney and/or change of address letter.		
17.	<input type="checkbox"/>	A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.		
18.	<input type="checkbox"/>	A second copy of the published International Application under 35 U.S.C. 154(d)(4).		
19.	<input checked="" type="checkbox"/>	Form PCT/ISA/210, 220, 237 and Form PCT/IPEA/237		
20.	<input checked="" type="checkbox"/>	Other items or information. Form PCT/IB/301, 304, 308		

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10/559845			CALCULATIONS	PTO USE ONLY
21. <input checked="" type="checkbox"/> The following fees are submitted:				
<input checked="" type="checkbox"/> Basic National Stage Fee		\$300	\$300.00	
22. <input checked="" type="checkbox"/> Examination Fee If the written opinion prepared by ISA/US or the International preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4)		\$0		
All other situations		\$200	\$200.00	
23. <input checked="" type="checkbox"/> Search Fee (37CFR 1.492(b)) If the written opinion of the ISA/US or the International preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4)		\$0	\$100.00	
Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority		\$100		
International Search Report prepared by an ISA other than the US and provided to the Office or previously communicated to the US by the IB		\$400		
All other situations		\$500		
TOTAL OF 21, 22 and 23 =			\$600.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.			\$	
Total Sheets	Extra Sheets	Number of each additional 50 or fraction Thereof (round up to a whole number)	RATE	
-100	/50=		X\$250	\$
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).			\$130.00	
CLAIMS		NUMBER FILED	NUMBER EXTRA	RATE
Total Claims		11-20 =		x \$50.00
Independent Claims		2-3 =		x \$200.00
Multiple dependent claim(s) (if applicable)			+ \$360.00	\$
TOTAL OF ABOVE CALCULATIONS =				\$730.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Fees above are reduced by 1/2.				\$
SUBTOTAL =				\$
Processing fee of \$130.00 for furnishing the English translation later than the 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+
TOTAL NATIONAL FEE =				\$
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				+
TOTAL FEES ENCLOSED =				\$730.00
				Amount to be refunded
				Amount to be charged
a. <input type="checkbox"/>	A check in the amount of \$ _____ to cover the above fees is enclosed.			
b. <input checked="" type="checkbox"/>	Please charge my Deposit Account No. <u>500417</u> in the amount of \$ <u>730.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.			
c. <input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>500417</u> . A duplicate copy of this sheet is enclosed.			
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.				
SEND ALL CORRESPONDENCE TO: Customer Number 20277 Telephone: 202.756.8000 Facsimile: 202.756.8087				
SIGNATURE Judith L. Toffenetti NAME 39,048 REGISTRATION NUMBER				
Date: December 7, 2005				